

## DO/ EO WORKSHEET

Paralegal/National Stage Division

U.S. Appl. No. 10/519086International Appl. No. JP03/07795Application filed by:  20 months  30 months

## WIPO PUBLICATION INFORMATION:

Publication No.: WO 2004/003362Publication Language:  English  German  Japanese  Chinese  Korean  
 French  Spanish  Russian  Other: \_\_\_\_\_Publication Date: 08 JAN 04Not Published:  U.S. only designated  EP requestPublished:  EP request

## INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

<input type="checkbox"/> International Application (RECORD COPY)	<input type="checkbox"/> PCT/IB/331
<input type="checkbox"/> Article 19 Amendments	<input checked="" type="checkbox"/> Request form PCT/RO/101
<input type="checkbox"/> PCT/IPEA/409 IPER: <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU <input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____	<input type="checkbox"/> PCT/ISA/210 - Search Report: <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU <input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____
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<input type="checkbox"/> Basic National Fee (or authorization to charge)	<input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on: 1. _____ 2. _____ 3. _____
<input checked="" type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input checked="" type="checkbox"/> Abstract	<input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on: 1. _____ 2. _____ 3. _____
<input checked="" type="checkbox"/> Drawing Figure(s) - (# of drwgs. <u>11</u> )	<input type="checkbox"/> Assignment Document (forwarded to Assignment Branch)
<input type="checkbox"/> Translation of Article 19 Amendments <input type="checkbox"/> entered <input type="checkbox"/> not entered: <input type="checkbox"/> not a page for page substitution <input type="checkbox"/> replaced by Article 34 Amendment	<input type="checkbox"/> Assignee PG Publication Notice <input type="checkbox"/> Substitute Specification Filed on: 1. _____ 2. _____
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<input type="checkbox"/> Power of Attorney/ Change of Address	<input type="checkbox"/> Other: _____

NOTES:  I.A. used as Specification  Other: \_\_\_\_\_

35 U.S.C. 371 - Receipt of Request (PTO-1390)

Date Acceptable Oath/ Declaration Received: 23 Dec 04

Date of Completion of requirements under 35 U.S.C. 371

Date of Completion of ALL requirements (no EP requested)

Date of Completion of DO/ EO 903 - Notification of Acceptance

Date of Completion of DO/ EO 905 - Notification of Missing Requirements

Date of Completion of DO/ EO 909 - Notification of Abandonment

Date of Completion of DO/ EO 916 - Notification of Defective Response

Date of Completion of DO/ EO 922

Date of Completion of DO/ EO 923

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